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1-4-2013

**Federal Election Commission** 999 E Street, N.W. Washington, D.C. 20463

Re: Form 1, Statement of Organization—Unlimited Contributions

To Whom It May Concern:

This committee intends to make independent expenditures, and consistent with the U.S. Court of Appeals for the District of Columbia Circuit decision in SpeechNow v. FEC, it therefore intends to raise funds in unlimited amounts. This committee will not use those funds to make contributions, whether direct, in-kind, or via coordinated communications, to federal candidates or committees.

Respectfully submitted,

Deborah W. Wall

. Treasurer

## FINE TOOLEGE

FEC FORM 1

## STATEMENT OF **ORGANIZATION**

RECEIVED

MAC CIUS	1	U	AFT	U	• •	٠
			Office I	Use	Only	

			Office Use Only
NAME OF     COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
Washington	1/801 1 1 1 1 1		
ADDRESS (number and street)	6798 N Ha	yston Aire	Dan sangaran kabupatèn
(Check if address is changed)			en de la deservación de la companya
io ditaligos,	Fresing :	The following the	CA 93710 STATE A ZIP CODE A
COMMITTEE'S E-MAIL ADDRES	SS		
(Check if address is changed)	info Dwash	ingition 1,80.	oi€ g: + - : - : - : - : - : - : - : - : - :
	Optional Second E-Mail Add		
COMMITTEE'S WEB PAGE ADD	DRESS (URL)		
(Check if address is changed)		ng to n1 80 - 10	<b>(19</b> ) (1), (1), (1), (1), (1), (1), (1), (1)
		1. 1. 2. 1. 3. 1. 4. 3. 4. 4.	, t. t. J. ( .), T. t. o. o. o. t. t. t. o. s.
2. DATE O 1 O  3. FEC IDENTIFICATION NU  4. IS THIS STATEMENT V	4 2013 JMBER ► C NEW (N) OR	AMENDED (A)	
I certify that I have examined th	is Statement and to the best	of my knowledge and belief it	is true, correct and complete.
Type or Print Name of Treasurer	DEBORAH	W. WALL	
Signature of Treasurer	hurah W. Wall		Date 01 04 2013
		may subject the person signing to DN SHOULD BE REPORTED W	his Statement to the penalties of 2 U.S.C. §437g. ITHIN 10 DAYS.
Office Use		For further information of Federal Election Commission Toll Free 800-424-9530	PPL PLIENT I

5.

FEC FOI	rm 1 (Hevised U2/2009)		Page Z	
TYPE OF Co	OMMITTEE Committee:			
(a)	This committee is a principal campa	aign committee. (Complete the candidate inform	nation below.)	
(b)	This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)			
Name of Candidate	·	وما أحداده المعاملة والمعاملة والمعا	والأرباء والمطالب المراجات المراجات المحالية	
Candidate Party Affiliation	Office Sought:	House Senate	State President District	
(c)	This committee supports/opposes o	nly one candidate, and is NOT an authorized o	committee.	
Name of Candidate				
Party Com	nmittee:	(National, State	(Democratic,	
(d)	This committee is a	or subordinate) committee of the	Republican, etc.) Party.	
Political A	ction Committee (PAC):			
(e)	This committee is a separate segre	gated fund. (Identify connected organization on	line 6.) Its connected organization is a:	
	Corporation	Corporation w/o Capital Stock	Labor Organization	
	Memburship Organization	Trade Association	Cooperative	
	In addition, this comm	nittee is a Lobbyist/Registrant PAC.		
(i) <b>X</b>	This committee supports/opposes n committee. (i.e., nonconnected comm	nore than one Federal candidate, and is NOT and its not an ittee)	a separate segregated fund or party	
	In addition, this committee is	a Lobbyisit/Registrant PAC.		
	In addition, this committee is	a Leadership PAC. (Identify sponsor on line 6.)		
Joint Fund	raising Representative:			
(g)		, pays fundraising expenses and disburses net p le of which in an aethorized committe of a foder		
(h)		, pays fundraising expenses and disburses net p nich is an authorized committee of a federal cano		
Com	mittees Participating in Joint Fund	draiser		
1.		FEC ID number	н С	
2.		FEC ID number	a. C	
3.		FEC ID number	ar C	
4.		FEC ID numbe	r C	

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•	Write or Type Committee I	Name					
	Washin	aton 1	80				
6.	Name of Any Connect	•		Fundralsing Repres	entative, or Lead	lership PAC Spon	sor
					•		
							1
	Mailing Address	[11:1:				11:00	
						: 1 1 "	
		·	CITY		STATE	ZIP CODE	·
7.	Custodian of Records: books and records.	: Identify by name, add	ress (phone number	optional) and position	of the person in	possession of con	mmittee
	Full Name Wa	rne 7 Fi	ranklin				1 1
	Mailing Address	•	N Haysto				
	Walling Address						
			<i>Q</i> . : : 1 / 1 : 1				
		1 11 1612 14:1	<i>Q</i> -1			A P. P. Ong. 1	. •
	Title or Position		CITY	S	TATE	ZIP CODE	
	Director			Telephone numbe	er e	:	
8.	Treasurer: List the name			he treasurer of the co	ommittee; and the	name and addres	ss of
	Full Name	B AD 111 1/	1/1/1				

of Treasurer

Mailing Address

67,98 N Hayston Ave

Fresno

CITY

ZIP CODE

Title or Position

Treasurer

Telephone number

9.

Full Name of Designated Agent	wayne it Franklin		
Mailing Address	167,98 N. Haysiton A	TVICE LIE PIVE	$t_{i} = 1 \cdot t \cdot t \cdot t \cdot t^{-1}$
	Fivesimo 111111111111111111111111111111111111		<u> </u>
Title or Position  D; i : ( ; e ; e ; + ;	O P I I I I I I I I I I I Tele	phone number 808	543 2075
	Depositories: List all banks or other depositories in which the or maintains funds.  Sepository, etc.	ne committee deposits fund	ds, holds accounts, rents
: !	Siecuriity Filirst Bank	i, to to A. E.A. E. i. o	
Mailing Address	16,63, Wessit, Shaw Au	<u>Lennal</u>	.) 1,1 1 1 1 1 1,1 1
	المنظم المناسلة المنظم	121 32323 2 3 4 1	
	Firesinally		9,37,7,0
	CITY	STATE	ZIP CODE
Name of Bank, De	epository, etc.		
;			$(1-\epsilon)(1-f)(1-f)(1-f)(1-f)$
Mailing Address		1 1 1 1 1 1 1 1 1	$\{ \{ (1,1), (1,1), (1,1), (1,1) \}$
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	CITY	STATE	ZIP CODE

## **Federal Election Commission ENVELOPE REPLACEMENT PAGE FOR INCOMING DOCUMENTS** The FEC added this page to the end of this filing to indicate how it was received. Date of Receipt **Hand Delivered** Postmarked **USPS First Class Mail** Postmarked (R/C) **USPS** Registered/Certified **Postmarked USPS Priority Mail** Delivery Confirmation<sup>™</sup> or Signature Confirmation<sup>™</sup> Label **Postmarked USPS Express Mail** Postmark Illegible No Postmark **Shipping Date** Overnight Delivery Service (Specify): **Next Business Day Delivery Date of Receipt** Received from House Records & Registration Office **Date of Receipt** Received from Senate Public Records Office **Date of Receipt** Received from Electronic Filing Office Date of Receipt or Postmarked Other (Specify):

(3/2005)

**PREPARER**